

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | DATE | ID NO. | DATE    |
|---------------------------|------|--------|---------|
| FEE DETERMINATION         |      |        |         |
| O.I.P.E. CLASSIFIER       |      | 10     | 11/20   |
| FORMALITY REVIEW          |      | 64605  | 1-17-01 |
| RESPONSE FORMALITY REVIEW |      |        | 3-21-01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 +/- ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here

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